

Human Rights Bureau
Employment Relations Division
Department of Labor and Industry
P.O. Box 1728
Helena, Montana 59624-1728
(800) 542-0807
(406) 444-2884

Standard Release Form

I herby authorize anyone possessing medical, personnel, educational or any other information necessary for a full evaluation of my qualifications to furnish such information to the:

Human Rights Bureau
P.O. Box 1728
Helena, MT 59624-1728

I hereby release anyone so authorized and the Human Rights Bureau from all liability for any damages whatsoever in furnishing and obtaining such information.

Signature of Charging Party

Subscribed and Sworn to before me this _____ day of _____, 20____.

Notary Public for the State of Montana

Residing at _____

My Commission expires _____